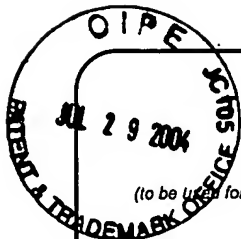


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PTO/SB/21 (04-04)

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Application Number	10/826,661
Filing Date	April 16, 2004
First Named Inventor	KUHNE, TIMM
Art Unit	3725
Examiner Name	Unassigned
Attorney Docket Number	081248-000000US

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

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|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input checked="" type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Return Postcard
EP Search Report
2 Reference Copies |
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Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP	Reg. No. 29,541
Signature		
Date	7/23/04	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Signature		Date	7/26/04

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Attorney Docket No.: 081248-000000US
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On

7/26/04

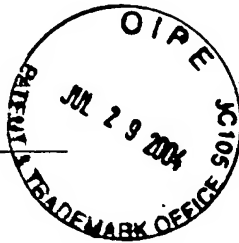
TOWNSEND and TOWNSEND and CREW LLP

By:



Tiffany Wu

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re application of:

TIMM KUHNE

Application No.: 10/826,661

Filed: April 16, 2004

For: DIE FOR A TOOL SET FOR
MECHANICAL JOINING

Examiner: Unassigned

Art Unit: 3725

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

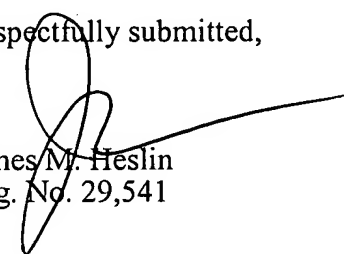
Also enclosed is a copy of the Search Report corresponding to the European Application No. EP 04007512. The Examiner is requested to note that EP 0779843, cited on the enclosed EP Search Report, was published as PCT WO 97/02912 (art. 158 of the EPC). PCT WO 97/02912 was previously disclosed in an Information Disclosure Statement dated June 30,

2004, directed to the above-identified application. Accordingly a copy of EP 0779843 is not submitted herewith. PCT WO 01/36124 and U.S. Patent No. 5,509,290 were also previously disclosed and copies are not included herewith.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



James M. Heslin
Reg. No. 29,541

TOWNSEND and TOWNSEND and CREW LLP
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San Francisco, California 94111-3834
Tel: 650-326-2400
Fax: 650-326-2422
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60267573 v1

Substitute for form 1449B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet

3

of

Complete if Known

Application Number	10/826,661
Filing Date	April 16, 2004
First Named Inventor	KUHNE, TIMM
Art Unit	3731
Examiner Name	Unassigned
Attorney Docket Number	081248-000000US

U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-5,339,509	Sawdon et al.	08-23-1994	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
	AB	EP	0993902	A2	04-19-2000			<input checked="" type="checkbox"/>
								<input type="checkbox"/>
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								<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

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Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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